

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	mg		11/27
O.I.P.E. CLASSIFIER		13	11/30
FORMALITY REVIEW	CM	71632	12/7/98

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	11/27/97
2	✓	✓	11/27/97
3	✓	✓	11/27/97
4	✓	✓	11/27/97
5	✓	✓	11/27/97
6	✓	✓	11/27/97
7	✓	✓	11/27/97
8	✓	✓	11/27/97
9	✓	✓	11/27/97
10	✓	✓	11/27/97
11	✓	✓	11/27/97
12	✓	✓	11/27/97
13	✓	✓	11/27/97
14	✓	✓	11/27/97
15	✓	✓	11/27/97
16	✓	✓	11/27/97
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18	✓	✓	11/27/97
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If more than 150 claims or 10 actions  
staple additional sheet here

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